

Custom Lift Products Planning Sheet

by **DRAPER**

Planning sheet submission required with your order or request for quotation. Please mark appropriate response to each item.

Date: _____ Dealer Name: _____

Contact Name: _____

Contact phone and e-mail: _____

Project Name: _____

Product to be moved: _____

Model Number: _____

Mount Being Used: _____

Product Dimensions and Weight: _____

Travel Distance to Viewing Position of Product: _____

Functions

TV Lift: Lift Up Pullout Drop Down Swing Down Swivel/Pivot Degrees: _____ Tilt Degrees: _____
(Check all that apply)

Panel/Picture: Vertical Horizontal Bi-Parting ([Left/Right] [Up/Down]) Tilt Degrees: _____
(Check all that apply)

Camera Lift: Lift Up Drop Down Pullout/Pivot Degrees: _____ Tilt Degrees: _____
(Check all that apply)

Mechanism Model#: _____

Height Constraints: _____

Interior Dimensions of Enclosure: _____

Swivel Direction & Degrees: _____

Spatial Limitations: _____

Mount Being Used: _____

Include current sensor where appropriate.

Select Voltage: 110V 220V

Type of Controls: RF Remote IR Remote Touch Pad RS232

Comments: _____



PROJECT: _____
ARCHITECT: _____
CONTRACTOR: _____
SUPPLIER: _____
DATE: _____ REVISED: _____